



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov

## \*BIBDATASHEET\*

CONFIRMATION NO. 6941

Bib Data Sheet

|                             |                                       |              |                        |                        |
|-----------------------------|---------------------------------------|--------------|------------------------|------------------------|
| SERIAL NUMBER<br>10/609,049 | FILING DATE<br>06/27/2003<br><br>RULE | CLASS<br>401 | GROUP ART UNIT<br>3751 | ATTORNEY<br>DOCKET NO. |
|-----------------------------|---------------------------------------|--------------|------------------------|------------------------|

## APPLICANTS

Abdo Malki, Pasadena, CA;

\*\* CONTINUING DATA \*\*\*\*\*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 09/15/2003

|   |                               |                        |                       |                            |
|---|-------------------------------|------------------------|-----------------------|----------------------------|
| Foreign Priority claimed<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no   | STATE OR<br>COUNTRY<br>CA     | SHEETS<br>DRAWING<br>7 | TOTAL<br>CLAIMS<br>20 | INDEPENDENT<br>CLAIMS<br>1 |
| 35 USC 119 (a-d) conditions met<br><input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance | EXAMINER'S SIGNATURE<br>_____ | INITIALS<br>_____      |                       |                            |
| Verified and Acknowledged   |                               |                        |                       |                            |

## ADDRESS

Abdo Malki  
 1005 Pepperhill Rd.  
 Pasadena , CA  
 91107

## TITLE

Compact toothbrush assembly

|                                   |   |   |
|-----------------------------------|---|---|
| FILING FEE<br><br>RECEIVED<br>375 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|-----------------------------------|---|---|